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UTILITY
PATENT APPLICATION
TRANSMITTAL

Attorney Docket No. 4041K-000160

First Inventor Yasuyoshi Suzuki et al.

Title METHOD FOR PRODUCING A SOFT MAGNETIC MATERIAL

Express Mail Label No. FL 623311815US

Express Mail Label No. EL623311815US (Only for new nonprovisional applications under 37 C.F.R. 1.53(b)) Mail Stop Patent Application APPLICATION ELEMENTS Commissioner for Patents ADDRESS TO: P.O. Box 1450 See MPEP chapter 600 concerning utility patent application contents. Alexandria, VA 22313-1450 1. Fee Transmittal Form (e.g., PTO/SB/17) CD-ROM or CD-R in duplicate, large table or (Submit an original and a duplicate for fee processing) Computer Program (Appendix) 2. 8. Nucleotide and/or Amino Acid Sequence Submission Applicant claims small entity status. See 37 CFR 1.27. (if applicable, all necessary) з. 🖂 Specification [Total Pages a. Computer Readable Form (CRF) (preferred arrangement set forth below) Specification Sequence Listing on: Descriptive title of the Invention i. CD-ROM or CD-R (2 copies); or Specification Cross References to Related Applications filed in English ii. 🔲 paper - Statement Regarding Fed sponsored R & D c. Statements verifying identity of above copies - Reference to sequence listing, a table, or a computer program listing appendix **ACCOMPANYING APPLICATIONS PARTS** - Background of the Invention - Brief Summary of the Invention 9. 🛛 Assignment Papers (cover sheet & document(s)) - Brief Description of the Drawings (if filed) 10. 37 C.F.R.§3.73(b) Statement Power of - Detailed Description (when there is an assignee) Attorney - Claim(s) - Abstract of the Disclosure 11. 🔲 English Translation Document (if applicable) 4. 🔯 12. Drawing(s) (35 U.S.C.113) [Total Sheets Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations [Total Pages | 5 5. Oath or Declaration] 13. 🖂 Preliminary Amendment a. Newly executed (original or copy) 14. Return Receipt Postcard (MPEP 503) b. Copy from a prior application (37 CFR 1.63 (d)) (Should be specifically itemized) (for a continuation/divisional with Box 18 completed) 15. Certified Copy of Priority Document(s) i. DELETION OF INVENTOR(S) (if foreign priority is claimed) Signed statement attached deleting inventor(s) 16. \square Request and Non Publication under 35 U.S.C. 122 named in the prior application, see 37 CFR (b)(2)(B)(i). Applicant must attach form PTO/SB/35 1.63(d)(2) and 1.33(b). or its equivalent. 6. Application Data Sheet. See 37 CFR 1.76 17. 🔲 Other: 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: □ Continuation □ Divisional ☐ Continuation-in-part (CIP) of prior application No: __ Prior application information: Examiner Group / Art Unit: For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 17. CORRESPONDENCE ADDRESS 27572 Correspondence address below □ Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) Harness, Dickey & Pierce, P.L.C. Name P.O. Box 828 Address City Bloomfield Hills State MI 48303 Zip Code Country United States of America Telephone 248-641-1600 Fax 248-641-0270 Name (Print/Type) Michael J. Schmidt Registration No. (Attorney/Agent) 34,007 Signature Date Det 17, 2003



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FEE TRANSMITTAL Application Number for FY 2004 Filing Date Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

**or number previously paid, if greater; For Reissues, see above

Complete if Known To Be Assigned Herewith First Named Inventor Yasuyoshi Suzuki et al. Examiner Name To Be Assigned Group / Art Unit To Be Assigned 4041K 000160

TOTAL AMOUNT OF PAYMENT (\$) 810						Attorr	Attorney Docket No.			4041K-000160			
METHOD OF PAYMENT (check all that apply)					匸	FEE CALCULATION (continued)							
☐ Check ☐ Credit card ☐ Money ☐ Other ☐ None						3. AD	3. ADDITIONAL FEES						
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SUBMITTED BY Complete (if applicable)										
Name (Print/Type)	Michael J. Schmidt	Registration No. Attorney/Agent)	34,007	Telephone	(248) 641-1600					
Signature	2/1	of he		Date	Oct 17,7003					